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BULLETIN

OF

...e National Association for the Study and Prevention of Tuberculosis

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Compulsory Hospital Law for New York Passed as War Measure

The Committee on the Prevention of Tuberculosis of the New York State Charities Aid Association was recently successful in getting the County Tuberculosis Hospital Law amended by the 1917 legislature, making the erection of hospitals mandatory in countries having more than 35,000 population.

The amendment was put through as a war measure, so that the state will be prepared to treat cases discovered in examining recruits or found in the army itself.

The new law affects twenty counties, eight of which had previously taken various steps leading to the erection of a hospital, but had not yet let contracts. Of these eight, two have already signed contracts for an institution. Of the twelve which had taken no action previously, eleven have now taken certain definite steps, such as the appointment of committees to secure sites, the advertising for bids, etc.

The section of the law relating to the compulsory establishment of hospitals is as follows:

"*Establishment of county hospital for tuberculosis.* The Board of Supervisors of every county in the state containing a population of thirty-five thousand or more, as determined by the latest state census, shall establish, as hereinafter provided, a county hospital for the care and treatment of persons suffering from the disease known as tuberculosis, unless there already exists in such county a hospital or institution provided by the county or other authority and caring for persons suffering from tuberculosis, which is approved by the state commissioner of health. Such county hospital shall be available for patients on or before the first day of July, nineteen hundred and eighteen. If the board of supervisors of any such county shall have failed to secure a site for a county tuberculosis hospital, and to have awarded contracts for the erection of suitable buildings thereon by the first day of January, nineteen hundred and eighteen, it shall be the duty of the state commissioner of health forthwith to proceed to locate, construct and place in operation a tuberculosis hospital in and for such county, the capacity of which shall not exceed the average number of deaths per annum from tuberculosis in such county during the past five years. For such purposes the state commissioner of health shall possess, and it shall be his duty to exercise all the powers which would have been possessed by the board of supervisors of such county, had such hospital been established and placed in operation by the board of supervisors thereof. All expenditures incurred by the state commissioner of health for and in connection with the location, construction and operation of such hospital shall be a charge upon the county, and provision shall be made for the payment therefor by the board of supervisors of such county in the same manner as in the case of other charges against the county. At any time after such hospital has been in operation, the board of supervisors in such county may appoint a board of managers for such hospital pursuant to the provisions of this act, and thirty days after the appointment of such board of managers by such board of supervisors, such hospital shall be transferred to such board of managers, and such board of managers shall thereafter possess and exercise all the powers of the board of managers of a county hospital for tuberculosis under this act, and the state commissioner of health shall be relieved from any responsibility therefor except such responsibility as he exercises in regard to all county tuberculosis hospitals under the provisions of this act."

This legislation was drawn up as a result of the report of Dr. Hermann M. Biggs on conditions in France, and also of a report on a visit to Canada by George J. Nelbach, executive secretary of the committee. Mr. Nelbach reported regarding Canada's methods and resources for handling cases of tuberculosis found in the army in the May issue of the *News*, a monthly bulletin issued by his association. He reported two conditions, as follows:

"From the public health point of view, that is, from the standpoint of diminishing infection, two conditions relating to the system of hospitalization of the invalided tuberculous soldiers seriously impair its effectiveness. The first is that the sick soldiers are not compelled to go to and remain in the institutions for care and treatment. They are still enlisted men and subject to military discipline, but public opinion would not now, at least, countenance the compulsory hospitalization of these cases. The country knows that the sick soldiers returned from overseas are longing for the sight of their homes, the prospect of which has sustained them in irksome hours, and are eager to meet their kinsfolk and friends. The public and the press venerate these men who have suffered so grievously for their country. Enforced hospital care of these tuberculous invalids, in the present state of public opinion, would be considered harsh and inhuman, and undoubtedly would not be tolerated.

"Secondly, the institutions are relatively widely scattered and the military districts served by them cover enormous areas, excepting in the case of the three maritime provinces, Nova Scotia, New Brunswick and Prince Edward Island. The policy is to persuade the men to go to the sanatoria in the military districts from which they enlisted. But the districts are so large, with the exceptions noted, that the relatives and friends cannot readily visit the patients. The sick men become homesick; and weakened by disease, their initiative slackened by enforced idleness, their fibre softened by experiences that have been enervating, they waive their right for further care and treatment and return home, taking their disease with them and exposing their households to infection."

New York State, Mr. Nelbach concluded, could draw three important lessons from the experience of Canada. They were:

"(1) Adequate medical examination for tuberculosis of all men considered for the army.

"(2) Sanatorium care for the early cases rejected by the medical examiners should be provided by the state; and hospital care for the moderate and advanced cases thus discovered should be provided by the local communities, cities or counties.

"(3) Soldiers invalided because of tuberculosis should be kept under military discipline and required to go into tuberculosis hospitals for care and treatment. The institutions should be sufficiently numerous throughout the state

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Annual Report of Seal Agents

In July the National Association sent out a general request through the state Red Cross Seal agents for an annual report from all seal agents who retain any of their funds to be expended locally. These reports were requested in accordance with condition nine of the Red Cross Seal contract for 1916. The National Association was led to call for these reports because its relation to The American Red Cross as a governmental agency and to the American people who contribute each year to the sale of Red Cross Seals demanded that the Association, as the responsible national agent for the sale, render a report on the manner in which the money is expended.

The blanks sent out must be somewhat voluminous but they were prepared in the simplest possible form and with notes attempting to explain the information desired under each heading. Most agents will find that it is not necessary to fill out all of the items listed, because their work does not include all phases of the work which the blank covers.

The Association believes that an annual inventory of the anti-tuberculosis associations of the country properly reported, studied and digested will be of great service to each of the organizations throughout the United States. The local associations should prepare reports in triplicate on the blanks supplied them and forward one to the National Association, one to the state association and retain one for their files. A large number of these reports have already been received and it is desired to commence tabulation of them in the near future. If your association has not yet reported, you are earnestly requested to fill out the blank and send it in at once.

Modern Health Crusaders' Department

The August meeting for Leagues is the most informal of the series of six for the year. An outing or picnic is recommended. As for all of these meetings each League may set the time at its convenience, either in August or September.

The educational subjects for this meeting, as stated in the Modern Health Crusaders' circular issued by the National Association, are field athletics and organized play, first aid to the injured drills.

The Playground and Recreation Association of America, 1 Madison Avenue, New York, invites correspondence with League masters and organizers. Its pamphlets, 105 and 121, describe athletic tests for boys and girls respectively. They are simple tests of physical efficiency. These pamphlets and a list of other publications will be sent free. The American Red Cross Hand Books, "First Aid General" and "First Aid for Women," may each be obtained from Washington or through local chapters for 35c. They must be interpreted for children by an adult leader. D. Appleton & Company publishes a book, "First Aid for Boys," price $1.25. Dr. Eldridge Eliason's "First Aid in Emergencies" (Lippincott) is written in simple language. Price 75c.

Two State Associations Reorganized

The Arizona Anti-Tuberculosis Association, a new organization to replace the Arizona Association for the Study and Prevention of Tuberculosis, was launched at a meeting on March 19, 1917, in the Arizona Club, Phœnix, Arizona. Reorganization was perfected, that the new society might be prepared to carry on more energetic work to meet the situation created by the war.

Governor Thomas E. Campbell was present and addressed the meeting. Others who spoke were Dr. Allen H. Williams, Dr. John W. Flinn, Dr. H. J. James, Dwight B. Heard, J. P. Hodgson, Professor A. J. Matthews and Mrs. Eugene Brady O'Neill.

The following officers were elected: Governor Campbell, Honorary President; Dr. C. A. Thomas, Tucson, President; Rev. B. R. Cocks, Phœnix; Dr. Flinn, Prescott; Dr. C. E. Rooney, Yuma, and Dr. C. T. Sturgeon, Globe, Vice-Presidents; Dr. A. H. Williams, Phœnix, Secretary-Treasurer; Dr. H. J. James, Assistant Secretary-Treasurer.

The New Mexico Association for the Study and Prevention of Tuberculosis was reorganized as the New Mexico Public Health Association at a meeting in Albuquerque on May 2, 1917. A board of directors composed of influential men and women from all sections of the State was elected.

The following officers were elected: Latham Jaffa, Roswell, President; Dr. Oliver T. Hyde, Albuquerque; Bronson M. Cutting, Santa Fe, and W. D. Murray, Silver City, Vice-Presidents; Dr. A. G. Shortle, Albuquerque, Secretary; J. B. Herndon, Albuquerque, Treasurer; Mrs. T. D. Rogers, Las Vegas, Assistant Secretary-Treasurer; Governor W. E. Lindsey, Santa Fe, Secretary of State; A. Lucero, Santa Fe, Secretary of State; J. H. Wagner, Superintendent of Public Instruction, Santa Fe, and Mrs. George L. Ladd, Mesilla Park, Honorary Vice-Presidents.

Prize Contest Amended

The New York Post Office held up the July issue of the BULLETIN temporarily, pending correspondence regarding the prize contest for health story talks announced in that issue. Objection was made to the following sentence which was regarded as conflicting with the postal laws and regulations: "The National Association reserves the right, however, not to make all or any of the awards if there should be a lack of stories suitable for the purposes for which the stories are asked."

The National Association regrets exceedingly that its announcement was so worded as to be considered contrary to law. The violation was made without any thought that it was illegal or even objectionable to the post-office authorities. To correct the mistake announcement is hereby made that a prize of $5.00 will be awarded for the story adjudged to be best in each of the two age classes, regardless of whether the stories are suitable for the purposes for which they are desired. Attention is again called to the fact that manuscripts must be submitted to the National Association not later than August 25th.

A Placard Suggestion

Dr. L. J. Simonton, of Okonoko, W. Va., submits to the National Association an interesting suggestion for a placard. Dr. Simonton calls himself a helpless, hopeless consumptive and is convinced that he was infected in childhood or early adult life. He advocates the printing of large cards to be put up in public places bearing some such words as "Please Don't Kiss My Child. Many diseases are conveyed by kissing, particularly tuberculosis. It is as dangerous to kiss the hand as the mouth. So please don't kiss at all."

Tuberculosis Work Among Negroes

By MISS ROSA LOWE

Executive Secretary, Atlanta Anti-Tuberculosis Association

The Anti-Tuberculosis Association of Atlanta realizes that the fight against tuberculosis directed in the field of white citizens to the neglect of the colored race is effort worse than lost. In April, 1917, plans were made with the negro section of the tuberculosis association to project a big campaign for educational and medical purposes among the negroes.

H. H. Pace, chairman of the negro tuberculosis work, and Mrs. John Hope, president of the Neighborhood Union, which is an organization of negro women engaged in visiting and helping the unfortunate in their communities, were called in conference to plan for this campaign and to divide the city into workable sections. Maps of the city were secured and the negro sections outlined, making nine divisions in all. This division of the city is to cover territory occupied by 60,000 negroes.

Plan of Organization

H. H. Pace, general chairman.

Mrs. John Hope, general supervisor of the work to be done by the colored women.

Mr. T. K. Gibson, chairman on literature.

Mr. W. J. Trent (secretary Y. M. C. A.), chairman on publicity.

Mrs. Mattie Ford, chairman on church committee to get cooperation of ministers.

Mrs. Graves (president of Kindergarten Association), chairman on neighborhood centers for clinical use.

Lectures (general diseases), doctors of Medical Society.

Clinics to be conducted by doctors.

Mrs. Andrews, superintendent of negro work of City Hospital, in charge of nursing service.

Nine colored women were selected as supervisors for the field work. In each district chairmen were selected to preside over groups of ten women each, for carrying out the plans of the campaign. About 250 women were thus organized for community visiting.

Purpose of Visiting

The purpose of this campaign was that the visitors might gain entrance into every colored home in the city with the view to becoming acquainted with the conditions there; that is, the number of people in the family; number of children; number of rooms in the house; general condition regarding health; the number of sick in the family. Also to stimulate a desire for and to aid, if possible, in home gardening for each family.

Gaining Co-operation of Leaders

Mrs. Hope, who is acquainted with every colored woman in Atlanta who does good effective work, gave the secretary a list of names of women who should be called in conference in regard to this movement. Letters were sent to all the colored ministers, doctors, and the most influential of the women in the city; also to the insurance men whose interest had been allied in former work for the race; the secretary of the Y. M. C. A., the principals of the public schools, and to members of the Kindergarten Association. At this initial meeting the plans were laid before this group and their cooperation gained.

The secretary, in company with one of the colored committee, visited the homes of the prospective chairmen and gained their consent to become the chairman of a committee of ten to carry out the plans as outlined.

A committee of colored women were sent to the Ministers' Union to lay before the ministers the plans of the campaign and ask for their cooperation in executing them. Also a representative was sent to the Medical Society, stating definitely the work which the society would be called upon to perform, viz., provide speakers for the mass meetings, and doctors to examine patients at the clinics. A representative was also sent before the Normal Class of the colored teachers connected with the public schools, and the plans of the campaign were presented and work which the teachers could do outlined. A representative was sent to all the negro churches and Sunday schools to appeal to the congregations in behalf of the movement. This was in addition to the remarks or sermon of the pastor, who was requested by the National Health League to make Sunday, April 22nd, "Sermon Day" for Health Week. At a mass meeting of the Parent-Teacher Association held in the afternoon of "Sermon Day," the secretary of the Anti-Tuberculosis Association was invited to present the work of the educational-medical campaign and give some of the needs of such a campaign by means of stereopticon views.

Actual Work

The campaign was launched two weeks previous to the National Negro Health Week, in order that this national campaign might be observed and the educational-medical campaign given impetus. The women visitors began their work immediately and selected their assistants, supplying them with literature for distribution in the homes visited.

The six leading insurance companies for negroes furnished health bulletins for distribution at their own expense. The committee printed special instructions for the workers, setting forth the purpose of the campaign and providing definite information of how to proceed in connection with this visiting. These instructions were gotten up in the form of pads and furnished to the visitors.

A meeting of these workers is called weekly at Big Bethel Church, which is one of the largest churches in Atlanta, located in the heart of the negro section. At these meetings reports are given of work done, suggestions called for in regard to certain conditions, and the reports are turned in, in order that unsanitary conditions may be reported to the proper sources in the city.

It has been a matter of great surprise to the Anti-Tuberculosis Association to find the conditions existing which have been reported; many open wells which are unused, but never have been covered, thus furnishing breeding places for mosquitoes; also plumbing which has been out of repair for many weeks; cases of sick persons who have been unattended, etc. These cases have been handled immediately. Open wells, standing water, and broken plumbing have been reported to the city health office, and the assurance that conditions would be remedied has been received.

Donations of lime from wholesale dealers were secured to supply any of the families who were unable to purchase lime to sprinkle over their premises. This lime was stationed in the different sections of the city in the care of one of the visitors and the community invited to come to this point to obtain lime.

Clinics in Operation

After a mass meeting a few days in advance the first clinic was opened at a community center known as Neighborhood House. A group of doctors from the Medical Society had been appointed to take charge of the clinic at this point. Negro nurses, under the organization of Mrs. Andrews (colored), who is the superintendent of the negro department at the City Hospital, were present to assist in these clinics. One nurse was appointed head nurse for the week, with three or four others working under her direction. History sheets had been furnished for these clinics by the Anti-Tuberculosis Association. The head nurse of the Association instructed the colored nurses how to fill out the charts and what duties were necessary for them in the capacity of clinical nurses. Many interesting cases were discovered in this clinic. The service of the doctors was well done, and the spirit and cooperation of both nurses and physicians were very gratifying. Some of the patients reporting at this clinic, and some who were found by the visitors in their homes, have already been placed in the City Hospital, the Tuberculosis Hospital, Orphans' Home, and other places, according to the need of the case. After one week of clinical service at Neighborhood House, the work has been removed to another section of the city, where a different group of the doctors and possibly a different group of nurses again render service in carrying out the medical work.

The Anti-Tuberculosis Association is highly pleased with the spirit of help-

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Sectional Conference Officers Announced

If the number of inquiries for information and suggestions for program and arrangements reaching the National Association office thus early is any criterion, the six sectional conferences to be held in the fall will attract greater attention and be more largely attended than any held heretofore. The important place which tuberculosis occupies in the discussion of war problems is undoubtedly responsible in part for the increased enthusiasm for these conferences, although the attendance at these meetings has been increasing each year, and it is only natural that increased interest should be aroused. The abnormal increase, however, seems to indicate that this year more than ever there will be need for sectional meetings where anti-tuberculosis workers and others interested in the campaign can meet and discuss war problems and other methods and programs of work. Undoubtedly, a discussion of various problems arising from the war will occupy an important place on the program, as has been suggested by many of those corresponding with the National Association. There will be ample opportunity afforded, however, for discussion of many other phases of the anti-tuberculosis campaign.

The programs of the conferences are now being arranged and speakers secured, and a detailed announcement of topics and speakers will be made in the September BULLETIN. In the meantime, lest anyone forget the time and place, we repeat that the conferences will be held as follows: The New England Conference in Rutland, Vt., October 4th and 5th; the North Atlantic Conference in Baltimore, Md., October 18th and 19th; the Southern in Chattanooga, Tenn., November 9th and 10th; the Mississippi Valley in St. Paul and Minneapolis, Minn., October 8th, 9th and 10th; the Northwestern in Portland, Ore., October 15th and 16th; and the Southwestern States at the Grand Canyon of Arizona, October 22d and 23d.

The following officers have been appointed:

New England Conference: Dr. Edward O. Otis, Boston, Mass., President; Vice Presidents—Dr. James J. Minot, Boston, Mass.; Mr. H. B. Cheney, South Manchester, Conn.; Mr. Thomas Magner, Burlington, Vt.; Mr. J. Brodie Smith, Manchester, N. H.; Dr. Charles V. Chapin, Providence, R. I.; Mrs. S. R. Prentiss, Bangor, Maine; Secretary, Mr. Harold W. Slocum, Burlington, Vt.

North Atlantic Conference: Dr. Henry Barton Jacobs, Baltimore, Md., President; Vice Presidents—Mr. Frederick B. Pratt, Brooklyn, N. Y.; Dr. Charles H. Miner, Wilkes-Barre, Pa.; Dr. Albert Robin, Wilmington, Del.; Dr. William H. Welch, Baltimore, Md.; Mr. William H. Baldwin, Washington, D. C.; Dr. Charles R. Grandy, Norfolk, Va.; Dr. E. E. Clovis, Terra Alta, W. Va.; Dr. Thomas N. Gray, Newark, N. J.; Secretary, Mr. H. Wirt Steele, Baltimore, Md.

Southern Conference: Dr. L. B. McBrayer, Sanatorium, N. C., President; Vice Presidents—Dr. Louis A. Bize, Tampa, Fla.; Dr. W. L. Dunn, Asheville, N. C.; Dr. Robert Wilson, Jr., Charleston, S. C.; Mr. C. P. J. Mooney, Memphis, Tenn.; Mr. Kendall Weisiger, Atlanta, Ga.; Dr. G. J. Greil, Montgomery, Ala.; Mrs. Edward McGehee, Como, Miss.; Dr. E. W. Mahler, New Orleans, La.; Secretary, Mr. James P. Kranz, Nashville, Tenn.

Central Council of Mississippi Valley Conference: James Minnick, Chicago, Ill., President; Dr. Robinson Bosworth, St. Paul, Minn., Secretary; A. W. Jones, Jr., St. Louis, Mo.; Dr. H. E. Dearholt, Milwaukee, Wis.; A. J. Strawson, Indianapolis, Ind.; Miss Maude Van Sickle, Detroit, Mich.; Dr. R. G. Paterson, Columbus, Ohio; Walter D. Thurber, Chicago.

Northwestern Conference: Mr. A. L. Mills, First National Bank, Portland, Ore., President; Vice Presidents—Dr. Ralph Matson, Portland, Ore.; Dr. C. Quevil, Tacoma, Wash.; Mr. Henry L. Falk, Boise, Idaho; Mr. H. R. Cunningham, Helena, Mont.; Mr. C. A. Dunniway, Laramie, Wyo.; Mr. Heber J. Grant, Salt Lake City, Utah; Secretary, Mrs. Sadie Orr Dunbar, Portland, Ore.

Southwestern Conference: Dr. W. Jarvis Barlow, Los Angeles, Calif., President; Vice Presidents—Dr. John W. Flinn, Prescott, Ariz.; Dr. E. S. Bullock, Silver City, N. M.; Dr. Robert A. Peers, Colfax, Calif.; Dr. Theodore Y. Hull, San Antonio, Tex.; Dr. G. W. Holden, Denver, Colo.; Mr. E. K. Gaylord, Oklahoma City, Okla.; Hon. A. E. Cheney, Reno, Nev.; Secretary, John Tombs, Albuquerque, N. M.

New National Association Secretary

Dr. H. A. Pattison, of Rockford, Ill., has been added to the staff of The National Association for the Study and Prevention of Tuberculosis as Medical Field Secretary. Dr. Pattison will begin his duties with the National Association on August 20th. His immediate work will be the organization and promotion of the war program of the National Association. He will seek to organize effective preventive work in all of the military camps throughout the country. He will work in cooperation with various agencies in securing the lists of men who are rejected on account of tuberculosis, either before or after enlistment. He will also endeavor to establish in various states and cities programs for the adequate care of these cases and their families.

Dr. Pattison was born in Massachusetts and received his early educational training in the East, but studied medicine and has since practiced in Illinois.

TUBERCULOSIS WORK AMONG NEGROES

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fulness and interest shown by the negroes in carrying out the work in behalf of their race. We hope that the work thus begun temporarily may result in two or three permanent clinics for the negroes at different points in the city. We are sure that the two races will be brought nearer together in working for the common cause and that a better understanding will exist because of this union of service.

The white anti-tuberculosis associations in Southern cities should cooperate with the negro population for movements of health, beginning with the leaders of the race rather than with the lower classes.

The negroes have many organizations through which such a movement can be projected and *all* such organizations should be used. With them all measures for improvement should be undertaken, such as playgrounds, better school facilities, libraries, etc. They are working to secure these benefits which are means of prevention of disease. With a little aid and encouragement from the whites the full cooperation of the race may be obtained.

The observance of National Health Week among the negroes can easily be made permanent to the extent that better sanitary conditions among the negroes will exist the whole year. As a rule, those who have received educational advantages are anxious to share their benefits with the less fortunate and they in turn are grateful for the help given.

A more willing race of people will not be found in any section of the United States and the promotion of public health will never be successful if the work among the negroes is ignored. Legislation is unnecessary where cooperation is so complete, and enforced legislation without cooperation of the majority of the population will be a failure.

Get in touch with the work being done by the negroes, lend a helping hand and push your health plan in connection with their organized work, and success will crown your efforts.

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so that the men may be placed in the hospitals that are close to the localities in which their kinsfolk reside, enabling the latter to see the men frequently, thus promoting contentment and a willingness to cooperate with the hospital authorities in pursuing the course of treatment."

The State Charities Aid Association has issued a pamphlet entitled "A Compilation of the Laws of the State of New York Relative to County Tuberculosis Hospitals as of June 1, 1917." A copy may be secured from the Association upon request.